

**HONOLULU ETHICS COMMISSION**  
925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768  
Email: [ethics@honolulu.gov](mailto:ethics@honolulu.gov)  
Website: <http://www.honolulu.gov/ethics/>

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HONOLULU  
ETHICS COMMISSION  
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## 2019 ANNUAL REPORT

Lobbyist Annual Report  
(January 1 – December 31, 2019)  
(Type or Print Clearly)

### PART I LOBBYIST

NAME (Last) (First) (Middle)

Camp, Catherine M

LOBBYIST FIRM/EMPLOYER (if applicable)

Kamehameha Schools

TELEPHONE

(808) 523-6200

MAILING ADDRESS (No. and Street or P.O. Box)

567 South King Street

FAX

(808) 541-5305

EMAIL

cacamp@ksbe.edu

(City)

Honolulu

(State)

HI

(Zip Code)

96813

### PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)

Kamehameha Schools

TELEPHONE

(808) 523-6200

MAILING ADDRESS (No. and Street or P.O. Box)

567 South King Street

FAX

(808) 541-5305

EMAIL

ksinfo@ksbe.edu

(City)

Honolulu

(State)

HI

(Zip Code)

96813

### PART III EXPENDITURES, BY TYPE

Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other <input type="checkbox"/> Additional Sheet(s) Attached	
		TOTAL	0.00

# **PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING**

Fees	Amount 0.00
Compensation	Amount 264.00
Contributions	Amount 0.00
Membership Fees	Amount 0.00
<input type="checkbox"/> Check here if additional sheets attached	<input checked="" type="checkbox"/> n/a


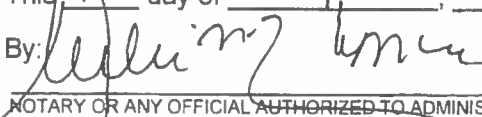
## **PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED**

<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input checked="" type="checkbox"/> Zoning & Planning	<input checked="" type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. 19-42 Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below):		

## **PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME (e.g., Bill X (2019), passed)**

1. Reso 19-42	Outcome: Adopted	4.	Outcome:
2.	Outcome:	5.	Outcome:
3.	Outcome:	<input type="checkbox"/> Additional Sheet(s) Attached	

## **PART VII LOBBYIST CERTIFICATION**

I hereby certify that the foregoing statements are true and correct.  LOBBYIST SIGNATURE <u>Kauli N. Burgess</u> DATE <u>8/20/2020</u>		Subscribed and sworn to before me This <u>20<sup>th</sup></u> day of <u>August</u> , 20 <u>20</u> By:  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: <u>EESLIE M. YAMASHITA</u> Notary Public, State of Hawaii My commission expires Sept. 27, 2020	
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